PN - Prenatal

PN-1T FIRST TRIMESTER

OUTCOME: The first trimester patient will understand the progression of pregnancy as related to fetal growth/development and changes in her body.

STANDARDS:

- 1. Explain the reproductive cycle. Identify and explain the functions of: the ovaries, ova, fallopian tubes, uterus, cervix, placenta and vagina as they relate to pregnancy.
- 2. Discuss fetal growth and development during the first trimester. Explain the need for adequate folate intake before pregnancy and throughout the first trimester to help prevent fetal neural tube defects.
- 3. Emphasize the importance of complete abstinence from alcohol, tobacco, and other drugs. Point out that use of drugs and/or alcohol during pregnancy can result in birth defects or other complications. Evaluate the patient's use of substances and refer for treatment as appropriate. **Refer to AOD.**
- 4. Teach the patient to inform all healthcare providers of the pregnancy prior to obtaining treatment, e.g., x-rays, medications.
- 5. Discuss the importance of good personal and dental hygiene as it relates to good health and positive self-image. **Refer to HPDP-HY.**
- 6. Discuss the dangers of fetal overheating in relation to hot baths, jacuzzis, sweat lodges, heating pads, etc. Discuss the relief measures for the discomforts of pregnancy.
- 7. Discuss sex during pregnancy. Encourage the patient to ask questions.
- 8. Emphasize the patient's responsibilities to herself and her growing child. Emphasize the importance of regular prenatal care, rest, prescribed vitamins, iron, and good nutrition. Discuss the dangers of exposure to infectious diseases, e.g., measles, toxoplasmosis, STIs, parvovirus (5th Disease).
- 9. Emphasize the importance and encourage enrollment in prepared childbirth and parenting classes.

PN-2T SECOND TRIMESTER

OUTCOME: The patient/family will understand the progression of pregnancy as related to fetal growth and development and changes in the body.

STANDARDS:

1. Discuss fetal growth and development in the second trimester.

- 2. Discuss the changes in the mother's body during the second trimester. Discuss exercise, rest, and relief measures for second trimester discomforts of pregnancy.
- 3. Encourage breastfeeding vs. bottle-feeding. Emphasize the advantages of breastfeeding for both mother and baby. **Refer to BF**.
- 4. Identify risks and warning signs for preterm labor (e.g., bleeding, cramping, unexplained abdominal pain).

PN-3T THIRD TRIMESTER

OUTCOME: The patient/family will understand the progression of pregnancy as related to fetal growth and development and changes in the body.

STANDARDS:

- 1. Discuss changes in the mother's body during the third trimester. Discuss exercise, rest, and relief measures for third trimester discomforts of pregnancy.
- 2. Discuss the anatomy and physiology of lactation and care of the breasts and nipples **Refer to BF.**
- 3. Discuss sex during the late stages of pregnancy and early postpartum period. Discuss methods of contraception. Emphasize the importance of partner participation in family planning.
- 4. Discuss the signs of impending labor. Discuss those events that require immediate attention, e.g., ruptured membranes, bleeding, fever. Emphasize the importance of knowing "when you are in labor" and when to seek medical attention.
- 5. Discuss the three stages of labor. Discuss the possibility of a C-section. Review breathing exercises for labor. If feasible, refer the patient for childbirth education classes.
- 6. Discuss the hospital admission routines, e.g. fetal monitoring, IVs, induction.
- 7. Explain that a bacteria called *Group B strep* may be dangerous to the baby and explain the institution's screening procedure.
- 8. Refer to CB-PRO.

PN-ADM ADMISSION

OUTCOME: The patient/family will understand the hospital admission process for delivery.

STANDARDS:

- 1. Discuss preparations for preadmission, as appropriate:
 - a. What paper work to do in advance.
 - b. When to come to the hospital.

- c. What to bring to the hospital.
- d. Where to go for admission. This may include a hospital tour.
- e. What to expect on admission.

PN-AOD ALCOHOL AND OTHER DRUGS

OUTCOME: The patient/family will understand the disease process of chemical dependency/substance abuse and its relationship to fetal development.

STANDARDS:

- 1. Emphasize the importance of complete abstinence from alcohol, inhalants, other drugs, and tobacco because they are associated with birth defects and other complications. Evaluate the patient's use of substances and refer for treatment as appropriate. **Refer to AOD** and/or **TO**.
- 2. Discuss that alcohol use during pregnancy is directly associated with an identifiable syndrome in the child. This syndrome can cause developmental delay, hyperactivity, emotional and behavioral problems, mental retardation, learning disabilities, and decreased ability to function independently as an adult. **Refer to FAS**.
- 3. Refer to community resources as available or appropriate.

PN-BH BEHAVIORAL HEALTH

OUTCOME: The patient/family will understand some of the mental and emotional changes that may take place during and after pregnancy.

STANDARDS:

- 1. Discuss that pregnancy is a state of hormonal flux and may result in rapid and unpredictable mood swings.
- 2. Discuss any pre-existing mental or emotional health conditions in the patient or the patient's family.
- 3. Explain that although some emotional changes may be normal, others may require medication and/or other forms of treatment.
- 4. Discuss the signs and symptoms of post-partum depression. **Refer to PDEP**.
- 5. Refer to mental health or other resources as appropriate.
- 6. Explain that breastfeeding in the postpartum period may result in a more rapid return to pre-pregnancy weight.

PN-C COMPLICATIONS

OUTCOME: The patient/family will understand the potential complications of pregnancy and the appropriate action to take.

STANDARDS:

- 1. Discuss the symptoms of pre-term labor. Emphasize the importance of immediate evaluation by a physician for pre-term labor. Explain that immediate treatment may decrease but not eliminate the risk of neonatal death or lost pregnancy.
- 2. Explain that any bleeding as heavy as a period should prompt an immediate evaluation by a physician. Explain that this bleeding may be an early sign of miscarriage.
- 3. Explain that decreased fetal movement in the third trimester should prompt an immediate evaluation.
- 4. Emphasize to the patient that pregnancy induced hypertension may be asymptomatic or may be accompanied by warning signs (persistent swelling, persistent headaches, visual changes, decreased fetal movement, sudden weight gain, nausea, and vomiting in the third trimester). Stress that immediate medical attention should be sought if warning signs occur. **Refer to PN-PIH.**

PN-CUL CULTURAL/SPIRITUAL ASPECTS OF HEALTH

OUTCOME: The patient/family will understand the impact and influences cultural and spiritual traditions, practices, and beliefs have on health and wellness.

STANDARDS:

- 1. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness.
- 2. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are interactions with prescribed treatment. Explain that the medical treatment plan must be followed as prescribed to be effective and that some medications/treatments take time to demonstrate effectiveness.
- 3. Discuss that traditions, such as sweat lodges, may affect some conditions in detrimental ways. Healing customs or using a traditional healer may have a positive effect on the patient's condition.
- 4. Refer to clergy services, traditional healers, or other culturally appropriate resources.

PN-DC DENTAL CARIES

OUTCOME: The patient/family will understand how maternal oral hygiene and diet affect dental conditions in the mother and infant.

- 1. Explain that tooth decay (dental caries) is partially caused by bacteria in the mouth.
 - a. Explain that this bacteria can be transmitted from the mother to the infant. Emphasize the importance of never putting bottle nipples, pacifiers, or any feeding utensils in any mouth except the infant's mouth.
 - b. Emphasize the importance of the prenatal patient having a dental exam and treating dental caries before the birth of the infant.
- 2. Discuss the importance of oral hygiene for the infant and the mother. **Refer to DC-P.**
- 3. Discuss the necessity of adequate calcium in the diet of prenatal patients to prevent calcium loss from bones and teeth.

PN-DV DOMESTIC VIOLENCE

OUTCOME: The patient/family will understand that domestic violence is a primary, chronic, and preventable disorder.

STANDARDS:

- 1. Discuss abusive/violent behaviors in the patient's environment.
- 2. Explain co-dependency as it relates to domestic violence.
- 3. Identify risk factors and "red flag" behaviors related to domestic violence, e.g., belittling, demeaning, humiliating behaviors.
- 4. Discuss the role of alcohol and substance abuse as it relates to domestic violence.
- 5. Explain that the natural course of domestic violence is one of escalation and that without intervention it will not resolve.
- 6. Discuss the availabilities of shelters and other support options available in the patient's area. Make referrals as appropriate.
- 7. Assist to develop a plan of action which will ensure safety of all people in the environment of violence.

PN-EQ EQUIPMENT

OUTCOME: The patient/family will understand and demonstrate (when appropriate) the proper use and care of home medical equipment.

STANDARDS:

- 1. Discuss indications for and benefits of prescribed home medical equipment.
- 2. Discuss the types and the features of home medical equipment as appropriate.

- 3. Discuss and/or demonstrate the proper use and care of home medical equipment, participate in return demonstration by patient/family.
- 4. Discuss signs of equipment malfunction and proper action in case of malfunction.
- 5. Emphasize safe use of equipment, e.g., electrical cord safety, and disposal of sharps.

PN-EX EXERCISE

OUTCOME: The patient/family will understand the role of physical activity during pregnancy.

STANDARDS:

- 1. Review the basic recommendations/benefits of physical activity during pregnancy.
- 2. Explain that hormonal changes during pregnancy result in increased elasticity of tendons and may increase the risk of joint injuries.
- 3. Explain that, in general, a pregnant patient can maintain her previous level of physical activity but should contact her provider for specific instructions. Discuss any physical activities that are contraindicated.
- 4. Review appropriate exercise programs available in the community.

PN-FAS FETAL ALCOHOL SYNDROME

OUTCOME: The patient/family will understand the consequences of alcohol use during pregnancy.

STANDARDS:

- 1. Discuss that consumption of any amount of alcohol during pregnancy can cause FAS or FASD. **Refer to FAS**
- 2. Emphasize the importance of abstinence from any alcohol use during pregnancy (including beer, wine, liquor, and wine coolers).
- 3. Discuss available treatment or intervention options, as appropriate.

PN-FU FOLLOW-UP

OUTCOME: The patient/family will understand the importance of follow-up in prenatal care.

STANDARDS:

1. Discuss the importance of follow-up care.

- 2. Discuss the procedure for obtaining follow-up appointments and that follow-up appointments should be kept.
- 3. Emphasize that full participation of the treatment plan is the responsibility of the patient/family.
- 4. Discuss signs/symptoms that should prompt immediate follow-up.
- 5. Discuss the availability of community resources and support services and refer as appropriate.

PN-GD GROWTH AND DEVELOPMENT

OUTCOME: The patient/family will understand the unborn infant's growth and development.

STANDARDS:

- 1. Explain the conception process, the implantation, and the cell division, as appropriate. Discuss the functions of the placenta, the amniotic sac, and umbilical cord, as appropriate.
- 2. Give a basic overview of the unborn infant's growth and development.

PN-GDM GESTATIONAL DIABETES

OUTCOME: The patient/family will understand diabetes or carbohydrate intolerance during pregnancy and will establish a plan for control.

STANDARDS:

- 1. Discuss the management and careful monitoring of blood glucose.
- 2. Emphasize the need for an individualized meal plan by a registered dietitian.
- 3. Discuss that GDM increases the risk for developing Type 2 Diabetes. Discuss the effect of gestational diabetes on the infant (hypoglycemia in the early neonatal period, respiratory distress, complications of delivery, increased incidence of obesity and future development of Type 2 diabetes.).
- 4. Emphasize that prenatal care for future pregnancies should begin prior to conception for early monitoring of GDM.
- 5. Explain that blood glucose control may be more difficult to obtain in the third trimester due to hormonal changes that elevate blood glucose and that insulin may be needed. Emphasize the need for follow-up care in the post partum period to monitor blood glucose as recommended.

PN-GENE GENETIC TESTING

OUTCOME: The patient/family will understand that some diseases or conditions are inherited and that testing may be recommended.

- 1. Explain that some diseases or birth defects can be detected during pregnancy and tests that may be performed (e.g., ultrasound, blood tests, amniocentesis). Discuss the timing of the tests as appropriate.
- 2. Explain that not all patients are at equal risk for these conditions.
- 3. Refer appropriate patients to a physician or other provider for further evaluation.

PN-HIV HUMAN IMMUNODEFICIENCY VIRUS

OUTCOME: The patient/family will understand risk factors for HIV (mother and child).

STANDARDS:

- 1. Discuss risk factors and indications for HIV testing (mother and child).
- 2. Explain that early detection, early treatment, and full participation with the medication regimen as well as maintaining a healthy lifestyle can result in a better quality of life, slow the progression of the disease, and may have beneficial effects upon the delivery and longevity of the child.

PN-L LITERATURE

OUTCOME: The patient/family will receive literature about prenatal issues.

STANDARDS:

- 1. Provide the patient/family with literature on prenatal issues.
- 2. Discuss the content of the literature.

PN-M MEDICATIONS

OUTCOME: The patient/family will understand the purpose, proper use, and expected outcomes of prescribed drug therapy.

STANDARDS:

- 1. Describe the name, strength, purpose, dosing directions, and storage of the medication.
- 2. Discuss the risks, benefits, and common or important side effects of the medication and follow up as appropriate.
- 3. Discuss any significant drug/drug, drug/food, and alcohol interactions, as appropriate.
- 4. Discuss the importance of keeping a list of all current prescriptions and over-the-counter medicines, vitamins, herbs, traditional remedies, and supplements.

Encourage the patient to bring this list and pill bottles to appointments for medication reconciliation.

PN-MNT MEDICAL NUTRITION THERAPY

OUTCOME: The patient/family will understand the specific nutritional intervention(s) needed for the treatment or management of prenatal care.

STANDARDS:

- 1. Explain that Medical Nutrition Therapy (MNT) is a systematic nutrition care process provided by a Registered Dietitian (RD) that consists of the following:
 - a. Assessment of the nutrition related condition.
 - b. Identification of the patient's nutritional problem.
 - c. Identification of a specific nutrition intervention therapy plan.
 - d. Evaluation of the patient's nutritional care outcomes.
 - e. Reassessment as needed.
- 4. Review the basic nutrition recommendations for the treatment plan.
- 5. Discuss the benefits of nutrition and exercise to health and well-being.
- 6. Assist the patient/family in developing an appropriate nutrition care plan.
- 7. Refer to other providers or community resources as needed.

PN-N NUTRITION

OUTCOME: The patient/family will understand the role of nutrition in pregnancy as related to maternal health as well as fetal growth and development.

STANDARDS:

- 1. Explain the purpose of appropriate weight gain in pregnancy. Explain the actions to correct constipation, nausea, vomiting, or pica.
- 2. Encourage adequate calcium intake and calcium sources (e.g., milk products, calcium supplements). **Refer to OS-N** for other sources of calcium.
- 3. Explain the benefits of healthy eating habits. Explain that certain types of fish should be limited due to the risk of contamination (e.g., salmon, mackerel, tuna, sword fish).
- 4. Encourage a limited intake of artificial sweeteners and other foods or beverages sweetened by these products.
- 5. Encourage liberal intake of water.
- 6. Discuss supplemental food programs (e.g., WIC, food distribution/commodity programs, food stamps).

7. Refer patients with GDM to a registered dietitian for an individualized meal plan.

PN-PIH PREGNANCY-INDUCED HYPERTENSION AND PRE-ECLAMPSIA

OUTCOME: The patient/family will understand the risk, symptoms, and treatment of pregnancy-induced hypertension and preeclampsia.

STANDARDS:

- 1. Explain the difference between systolic and diastolic blood pressure. Define normal ranges for the individual. Review predisposing factors for hypertension (e.g., obesity, high sodium intake, high fat and cholesterol intake, lack of exercise).
- 2. Discuss pregnancy as a contributing factor to hypertension either by worsening existing hypertension or by the new onset of preeclampsia.
- 3. Emphasize that PIH may be asymptomatic or may be accompanied by warning signs (persistent swelling, persistent headaches, visual changes, decreased fetal movement, sudden weight gain, nausea, and vomiting in the third trimester.)

 Stress that medical attention should be sought immediately if warning signs occur.
- 4. Discuss the complications, e.g., seizures, maternal/fetal brain injury or death and premature birth.
- 5. Discuss that the healthcare provider may prescribe bed rest.

PN-PM PAIN MANAGEMENT

OUTCOME: The patient/family will understand some techniques for reducing discomfort during pregnancy.

STANDARDS:

- 1. Explain that headaches, abdominal and back discomfort, and other discomforts are common and expected in pregnancy.
- 2. Discuss measures that may relieve pain, e.g., warm bath, change of activity, massage.
- 3. Explain that most pain medications including NSAIDs should not be used in pregnancy, but that the patient's provider can recommend and/or prescribe pain medication if necessary.

PN-PTL PRE-TERM LABOR

OUTCOME: The patient/family will understand and identify risks and warning signs of pre-term labor.

- 1. Explain that preterm labor may not feel the same as term labor.
- 2. Emphasize the importance of seeking immediate medical attention for any abnormal sensations/symptoms especially if they occur at regular interval (e.g., bleeding, cramping, backache, unexplained abdominal pain).
- 3. Explain that early medical intervention may prevent preterm birth.
- 4. Explain that the healthcare provider may prescribe bed rest.

PN-S SAFETY AND INJURY PREVENTION

OUTCOME: The patient/family will understand safety measures specific to pregnancy.

STANDARDS:

- 1. Discuss the regular use of seat belts, children's car seats and obeying the speed limit. Discuss that seatbelts should be worn low on the hips and the shoulder belt should lie above the pregnant abdomen.
- 2. Discuss the dangers of fetal overheating in relation to hot baths, Jacuzzis, sweat lodges, heating pads, etc.
- 3. **Refer to HPDP-S** as appropriate.

PN-SHS SECOND-HAND SMOKE

OUTCOME: The patient/family will understand the adverse health consequences associated with exposure to second-hand tobacco smoke.

STANDARDS:

- 1. Define "passive smoking" and ways in which exposure occurs, e.g., smoldering tobacco, exhaled smoke, residue in carpet.
- 2. Discuss harmful substances in smoke, e.g., nicotine, benzene, CO, carcinogens.
- 3. Explain the increased risk of illness in children and adults when exposed to tobacco smoke, e.g., increased colds, asthma, ear infections, pneumonia, lung cancer.
- 4. Emphasize that the infants who are exposed to smoke in the home are three times more likely to die of SIDS than infants who live in a non-smoker's home.
- 5. Explain that cigarette smoke gets trapped in carpets, upholstery, and clothing still increases the risk of illness.
- 6. Discuss that having household members smoke outside and removing smoke contaminated clothing may decrease exposure to second hand smoke.

7. Encourage smoking cessation or at least never smoking in the home or car. **Refer to TO-QT.**

PN-SM STRESS MANAGEMENT

OUTCOME: The patient/family will understand the role of stress management in overall health and well-being.

STANDARDS:

- 1. Explain that uncontrolled stress may cause release of stress hormones that interfere with general health and well-being. Explain that effective stress management may help the patient have a more positive experience with pregnancy and childbirth.
- 2. Discuss that stress may exacerbate adverse health behaviors such as tobacco, alcohol, or other substance use as well as inappropriate eating all of which have been shown to have an adverse effect on the developing baby. Emphasize the importance of seeking professional help as needed to reduce stress.
- 3. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
 - a. Becoming aware of your own reactions to stress
 - b. Recognizing and accepting your limits
 - c. Talking with people you trust about your worries or problems
 - d. Setting realistic goals
 - e. Getting enough sleep
 - f. Maintaining a healthy diet
 - g. Exercising regularly
 - h. Taking vacations
 - i. Practicing meditation, self-hypnosis, and positive imagery
 - j. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
 - k. Participating in spiritual or cultural activities
- 4. Provide referrals as appropriate.

PN-SOC SOCIAL HEALTH

OUTCOME: The patient/family will understand social services available.

- 1. Discuss the patient's living situation including access to adequate housing, electricity, refrigeration, sanitation, running water, and adequate and nutritional foods.
- 2. Discuss the patient's access to transportation. Refer to community resources as available.
- 3. Discuss the patient's eligibility for state, federal, or tribal resource programs, e.g., WIC, state Medicaid, food stamps, commodities, housing assistance. Emphasize that IHS and/or ITU programs may not be able to meet all of the patient's needs; therefore, she should apply for all programs for which she may be eligible.
- 4. Discuss adoption, abortion, miscarriage, as appropriate. Refer to Community Resources, Behavioral Health, and/or Social Services as appropriate.

PN-STI SEXUALLY TRANSMITTED INFECTIONS (FORMERLY STD)

OUTCOME: The patient/partner will understand risk factors, transmission, symptoms, and complications.

STANDARDS

- 1. Discuss specific STIs and how they are transmitted, e.g., semen, vaginal fluids, blood, mother to infant during pregnancy, child birth, or breastfeeding.
- 2. Explain how STIs cannot be transmitted, e.g., casual contact, toilet seats, eating utensils, coughing.
- 3. Discuss that STIs may be curable or incurable STIs. Stress the importance of prevention and early treatment.
- 4. Explain that infection is dependent upon behavior, not on race, age, or social status.
- 5. Review the actions to take when exposed to an STI and complications that may result if not treated including complications in the unborn child.
- 6. **Refer to STI** and **HIV** as appropriate.

PN-TE TESTS

OUTCOME: The patient/family will understand the test(s) to be performed, including indications and impact on further care.

STANDARDS:

1. Explain the test ordered and any necessary preparation

- 2. Explain the necessity, benefits and risks of the test to be performed, as applicable, including possible complications that may result from not having the test performed.
- 3. Explain how the test relates to the course of treatment.
- 4. Explain the meaning of the test results, as appropriate.

PN-TO TOBACCO

OUTCOME: The patient/family will understand the dangers of tobacco or nicotine use during pregnancy.

STANDARDS:

- 1. Review the current information regarding tobacco use. Discuss the dangers of tobacco use during pregnancy. These include:
 - a. Low birth weight infants
 - b. Intrauterine growth retardation
 - c. Nicotine withdrawal in the newborn
 - d. Increased incidence of asthma and pneumonia in the child
 - e. Spontaneous abortion or miscarriage
 - f. Placental insufficiency
- 2. Explain nicotine addiction and the common problems associated with tobacco use. The long term effects of continued tobacco use include COPD, cardiovascular disease, and numerous kinds of cancers including lung cancer.
- 3. Review the effects of tobacco use on all family members e.g., financial burden, second-hand smoke, greater risk of fire, and premature death of a parent.
- 4. Explain dependency and co-dependency as it relates to addictive behavior.
- 5. Discuss that smoking is a serious threat to health. Encourage tobacco cessation. **Refer to TO**.

PN-VBAC VAGINAL BIRTH AFTER CESAREAN SECTION

OUTCOME: The patient/labor partner/family will understand that VBAC is possible, as well as the processes, risks, and benefits associated with VBAC.

STANDARDS

- 1. Discuss the success rate of VBAC. Explain the importance of having prior medical records to determine whether the patient is a candidate for VBAC. Discuss that there is a faster recovery after VBAC than a repeat C-section.
- 2. Explain that close monitoring of the labor process will be necessary and that if complications arise a C-section may be necessary.

PATIENT EDUCATION PROTOCOLS:

PN - PRENATAL

3. Explain that significant risks from VBAC include uterine rupture, failure to progress in labor, and C-section.